404573583

Application Data Sheet Application Information

AP20 R. CO. T. FTO 27 MAR 2006

Application number::

Filing Date:: March 27, 2006

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:: YES

Computer Readable Form (CRF)?:: YES

Number of copies of CRF:: 1

Title:: DIAGNOSTICS AND THERAPEUTICS FOR

DISEASES ASSOCIATED WITH ARGINYL

AMINOPEPTIDASE RNPEP-LIKE (RNPEP-LIKE)

Attorney Docket Number:: 004974.01113

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure:: 0

Total Drawing Sheets:: 4

Small Entity?::

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

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Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Stefan

Middle Name::

Family Name:: GOLZ

Name Suffix::

City of Residence:: Essen

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Buckmannsmuhle 46

City of mailing address:: Essen

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 45326

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Ulf

Middle Name::

Family Name:: BRUGGEMEIER

Name Suffix::

City of Residence:: Leichlingen

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Leysiefen 20

City of mailing address:: Leichlingen

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 42799

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Andrea

Middle Name::

Family Name:: GEERTS

Name Suffix::

City of Residence:: Wuppertal

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Schuckertstr 29

City of mailing address:: Wuppertal

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 42113

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Stefanie

Middle Name::

Family Name:: POLEJ

Name Suffix::

City of Residence:: Radolfzell

State or Province of Residence::

Country of Residence::

DE

Street of mailing address::

Feldstrasse 10

City of mailing address::

Radolfzell

State or Province of mailing address::

Country of mailing address::

DE

Postal or Zip Code of mailing address::

78315

Correspondence Information

Correspondence Customer Number::

22907

Representative Information

Representative Customer Number::

22907

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|-------------------|----------------------|----------------------|
| This Application | National Stage of | PCT/EP2004/010385 | 16 September 2004 |
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Foreign Priority Information

| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|-------------------|--------------------|
| EUROPE | 03021899.4 | 27 September 2003 | YES |
| | | | |
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| | | | |

Assignee Information

Assignee name:: BAYER HEALTHCARE AG

Street of mailing address::

City of mailing address:: Leverkusen

State or Province of mailing address::

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: D-51368